JEFFERSON LOCAL SCHOOL PROFESSIONAL MEETING AND WORKSHOP REACTION FORM

The purpose of this form is to keep the Board of Education informed about conferences that our staff attends and to relate such conferences to Personal Professional Development Plans.

Please make two copies of this completed form (including documentation of your presence).

The original is for your records to accompany your Personal Development Plan. The two copies should be sent to the Superintendent's office. (One will be placed in your LPDC file, one will be placed in the Superintendent's office)

PLEASE TYPE

Name	Position/Bldg.:
Date of conference/workshop:	
Name of conference/workshop atte	nded:
Your reimbursement, if any, by boa	ard for expenses:
Did this conference/workshop mee	t your expectations? Why or why not?
Also address its impact on your but	/workshop has helped your professional development. ilding and district if available.
	hing from this conference/workshop that you would velopment newsletter.

Please attach documentation as to your presence at this conference/workshop.